

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Gary DeLong

Full Name (Last, First, Middle Initial)

David Moore

Mailing Address 1540 W Express Way, #218

City

San Jose

State

CA

Zip Code

95126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mahler, Nixon & Williams

Occupation

Accountant

Receipt For: 2012

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

Transaction ID : INCA1797

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

Christina Newman

Mailing Address 122 Coral Ave

City

Newport Beach

State

CA

Zip Code

92662

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2012

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

Transaction ID : INCA1798

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

Michael Newman

Mailing Address 122 Coral Ave

City

Newport Beach

State

CA

Zip Code

92662

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michael Newman

Occupation

Property Manager

Receipt For: 2012

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

Transaction ID : INCA1799

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional).....

15000.00

TOTAL This Period (last page this line number only).....